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1617

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Mark et al.  
Appl. No.: 09/759,037  
Conf. No.: 3136  
Filed: January 10, 2001  
Title: CALORICALLY DENSE NUTRITIONAL COMPOSITION  
Art Unit: 1617  
Examiner: S. Sharareh  
Docket No.: 112701-138

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**



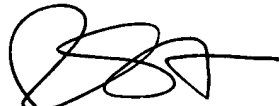
Sir:

In response to the Office Action dated April 21, 2004, please amend the above-identified patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					<b>Docket No.</b> 112701-138	
Applicant(s): Mark et al.						
Application No. 09/759,037	Filing Date January 10, 2001	Examiner S. Sharareh	Customer No. 29157	Group Art Unit 1617	Confirmation No. 3136	
Invention: <b>CALORICALLY DENSE NUTRITIONAL COMPOSITION</b>						
 <b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	17 -	22 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0 x	\$86.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818</div> <div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> <div style="text-align:right; margin-top: 20px;"> _____ <i>Signature</i></div> <div style="text-align:right; margin-top: 10px;">Dated: June 17, 2004</div> <div style="margin-top: 20px;"><b>Robert M. Barrett</b> Reg. No. 30,142 <b>BELL, BOYD &amp; LLOYD LLC</b> P.O. Box 1135 Chicago, IL 60690-1135 Phone: 312-807-4204</div>						
<div style="border: 1px solid black; padding: 5px;"><div>I certify that this document and fee is being deposited on 06-17-04 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="text-align:center; margin-top: 10px;"> <i>Signature of Person Mailing Correspondence</i></div><div style="text-align:center; margin-top: 10px;"><b>Renee Street</b> <i>Typed or Printed Name of Person Mailing Correspondence</i></div></div>						
CC:						